

**PATENT APPLICATION FEE DETERMINATION RECORD**  
Effective January 1, 2003

Application or Docket Number

10/632,506

**CLAIMS AS FILED - PART I**

|                                  | (Column 1)      | (Column 2)               |
|----------------------------------|-----------------|--------------------------|
| TOTAL CLAIMS                     | 18              |                          |
| FOR                              | NUMBER FILED    | NUMBER EXTRA             |
| TOTAL CHARGEABLE CLAIMS          | 18 minus 20 = * | 0                        |
| INDEPENDENT CLAIMS               | 3 minus 3 = *   | 0                        |
| MULTIPLE DEPENDENT CLAIM PRESENT |                 | <input type="checkbox"/> |

\* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY  
TYPE ☐

OR OTHER THAN  
SMALL ENTITY

| RATE      | FEE    |
|-----------|--------|
| BASIC FEE | 375.00 |
| X\$ 9=    |        |
| X42=      |        |
| +140=     |        |
| TOTAL     | 375    |

| RATE      | FEE    |
|-----------|--------|
| BASIC FEE | 750.00 |
| X\$18=    |        |
| X84=      |        |
| +280=     |        |
| TOTAL     |        |

**CLAIMS AS AMENDED - PART II**

10/15/04

|  | (Column 1)                       | (Column 2)                         | (Column 3)               |
|--|----------------------------------|------------------------------------|--------------------------|
| AMENDMENT A                                    | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA            |
| Total  | * 20                             | Minus ** 20                        | *                        |
| Independent                                    | * 3                              | Minus *** 3                        | =                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                                  |                                    | <input type="checkbox"/> |

1,7,13

SMALL ENTITY

OR OTHER THAN

| RATE       | ADDITIONAL FEE |
|------------|----------------|
| X\$ 9=     |                |
| X42=       |                |
| +140=      |                |
| TOTAL      |                |
| ADDIT. FEE |                |

| RATE       | ADDITIONAL FEE |
|------------|----------------|
| X\$18=     |                |
| X84=       |                |
| +280=      |                |
| TOTAL      |                |
| ADDIT. FEE |                |

|  | (Column 1)                       | (Column 2)                         | (Column 3)               |
|--|----------------------------------|------------------------------------|--------------------------|
| AMENDMENT B                                    | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA            |
| Total  | *                                | Minus **                           | =                        |
| Independent                                    | *                                | Minus ***                          | =                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                                  |                                    | <input type="checkbox"/> |

| RATE       | ADDITIONAL FEE |
|------------|----------------|
| X\$ 9=     |                |
| X42=       |                |
| +140=      |                |
| TOTAL      |                |
| ADDIT. FEE |                |

| RATE       | ADDITIONAL FEE |
|------------|----------------|
| X\$18=     |                |
| X84=       |                |
| +280=      |                |
| TOTAL      |                |
| ADDIT. FEE |                |

|  | (Column 1)                       | (Column 2)                         | (Column 3)               |
|--|----------------------------------|------------------------------------|--------------------------|
| AMENDMENT C                                    | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA            |
| Total  | *                                | Minus **                           | =                        |
| Independent                                    | *                                | Minus ***                          | =                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                                  |                                    | <input type="checkbox"/> |

| RATE       | ADDITIONAL FEE |
|------------|----------------|
| X\$ 9=     |                |
| X42=       |                |
| +140=      |                |
| TOTAL      |                |
| ADDIT. FEE |                |

| RATE       | ADDITIONAL FEE |
|------------|----------------|
| X\$18=     |                |
| X84=       |                |
| +280=      |                |
| TOTAL      |                |
| ADDIT. FEE |                |

- \* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
  - \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
  - \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.